

State of New Hampshire

Filing fee: \$50.00
Fee for Form SRA: \$50.00
Total fees \$100.00
Use black print or type.

Form 40
RSA 293-A:15.03

APPLICATION FOR CERTIFICATE OF AUTHORITY FOR PROFIT FOREIGN CORPORATION

PURSUANT TO THE PROVISIONS of the New Hampshire Business Corporation Act, the undersigned corporation hereby applies for a certificate of authority to transact business in New Hampshire and for that purpose submits the following statement:

FIRST: The name of the corporation is VESCOM CORPORATION

SECOND: The name which it elects to use in New Hampshire is VESCOM CORPORATION

THIRD: It is incorporated under the laws of ILLINOIS

FOURTH: The date of its incorporation is 4-2-1980 and the period of its duration is PERPETUAL

FIFTH: The complete address (including zip code and post office box, if any) of its principal office is 4019 AUGUSTA ROAD, STE 210, GARDEN CITY, GA 31408

SIXTH: The name of its registered agent IN NEW HAMPSHIRE is Incorp Services, Inc and the complete address (including zip code and post office box, if any) of its registered office IN NEW HAMPSHIRE is (agent's business address) 152 S. Mast Street Goffstown, NH 03045

SEVENTH: The sale or offer for sale of any ownership interests in this business will comply with the requirements of the New Hampshire Uniform Securities Act (RSA 421-B).

EIGHTH: The principal purpose or purposes which it proposes to pursue in the transaction of business in New Hampshire are SECURITY GUARD SERVICES

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NINTH: The names and usual business addresses of its current officers and directors are: (If there are additional officers or directors, attach additional sheet OR if the laws of the state of incorporation do not require directors, indicate below.)

<u>Name</u>	<u>Title</u>	<u>Address</u>
OFFICERS		
<u>SHERIF ASSAL</u>	<u>PRESIDENT</u>	<u>1299 E. ARTESIA BLVD #200</u> <u>CARSON, CA 90746</u>
<u>SHERIF ASSAL</u>	<u>CEO</u>	<u>1299 E. ARTESIA BLVD #200</u> <u>CARSON, CA 90746</u>
_____	_____	_____
DIRECTORS		
<u>Sherif Assal</u>	<u>President</u>	<u>1299 E. Artesia Blvd. #200</u> <u>Carson, CA 90746</u>
_____	_____	_____
_____	_____	_____

VESCOM CORPORATION
(Corporate Name)
[Signature]
(Signature)
SHERIF ASSAL
(Print or type name)
PRESIDENT
(Title)
Date signed: 8-18-14

To receive your ANNUAL REPORT REMINDER NOTICE by email, please enter your email address here:

DISCLAIMER: All documents filed with the Corporation Division become public records and will be available for public inspection in either tangible or electronic form.

Mail fees, DATED AND SIGNED ORIGINAL AND FORM SRA to: Corporation Division, Department of State, 107 North Main Street, Concord, NH 03301-4989. Physical location: 25 Capitol Street, 3rd Floor, Concord, NH 03301.



State of New Hampshire 2014 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2014

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

VESCOM CORPORATION

705 MAIN RD NORTH
HAMPDEN, ME 04444

ADDRESS OF PRINCIPAL OFFICE:

705 MAIN RD NORTH
HAMPDEN, ME 04444

1 REGISTERED AGENT AND OFFICE:

Prentice-Hall Corporation System, Inc.
14 CENTRE ST
CONCORD, NH 03301

ENTITY TYPE: CORPORATION

BUSINESS ID: 213608

STATE OF DOMICILE: ILLINOIS

INDUSTRIAL SECURITY SERVICES

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

2 ☒ The new mailing address 1299 E. ARTESIA BLVD #200, CARSON, CA 90746

☒ The new principal office address 4019 AUGUSTA ROAD, STE 210, GARDEN CITY, GA 31408
PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE OFFICER BELOW)

3 NAME SHERIF ASSAL
STREET 1299 E. ARTESIA BLVD # 200
CITY/STATE/ZIP CARSON, CA 90746
NAME SHERIF ASSAL
STREET 1299 E. ARTESIA BLVD # 200
CITY/STATE/ZIP CARSON, CA 90746
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE DIRECTOR BELOW)

B NAME SHERIF ASSAL
STREET 1299 E. ARTESIA BLVD #200
CITY/STATE/ZIP CARSON, CA 90746
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

To be signed by an officer, director, or any other person authorized by the board of directors.
I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

4 Sign here:

Please print name and title of signer:

NAME

TITLE

FEE DUE: \$150.00

E-MAIL ADDRESS (OPTIONAL):



021360820141503

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301

**Form SRA – Addendum to Business Organization and Registration Forms
Statement of Compliance with New Hampshire Securities Laws**

Part I – Business Identification and Contact Information

Business Name: VESCOM CORPORATION

Business Address (include city, state, zip): 4019 AUGUSTA RD. STE 210, GARDEN CITY, GEORGIA 31408

Telephone Number: (912) 349-2253 E-mail: njohnson@vescom.com

Contact Person: NELSON JOHNSON

Contact Person Address (if different): _____

Part II – Check ONE of the following items in Part II. If more than one item is checked, the form will be rejected. **[PLEASE NOTE:** Most small businesses registering in New Hampshire qualify for the exemption in Part II, Item 1 below. **However,** you must insure that your business meets all of the requirements spelled out in A), B), and C)]:

1. _____ Ownership interests in this business are exempt from the registration requirements of the state of New Hampshire because the business meets ALL of the following three requirements:
A) This business has **10 or fewer owners**; and
B) Advertising **relating to the sale of ownership interests** has not been circulated; and
C) Sales of ownership interests – if any – will be **completed within 60 days** of the formation of this business.
2. _____ This business will offer securities in New Hampshire under another exemption from registration or will notice file for federal covered securities. Enter the citation for the exemption or notice filing claimed - _____
3. _____ This business has registered or will register its securities for sale in New Hampshire. Enter the date the registration statement was or will be filed with the Bureau of Securities Regulation - _____
4. ☒ This business was formed in a state other than New Hampshire and will not offer or sell securities in New Hampshire.

Part III – Check ONE of the following items in Part III:

1. ☒ This business **is not being** formed in New Hampshire.
2. _____ This business **is** being formed in New Hampshire and the registration document states that any sale or offer for sale of ownership interests in the business will comply with the requirements of the New Hampshire Uniform Securities Act.

Part IV – Certification of Accuracy

(NOTE: The information in Part IV must be certified by: 1) all of the incorporators of a corporation to be formed; or 2) an executive officer of an existing corporation; or 3) all of the general partners or intended general partners of a limited partnership; or 4) one or more authorized members or managers of a limited liability company; or 5) one or more authorized partners of a registered limited liability partnership or foreign registered limited liability partnership.)

I (We) certify that the information provided in this form is true and complete. (Original signatures only)

Name (print): SHERIF ASSAL Signature: [Signature]

Date signed: 8-18-14

Name (print): _____ Signature: _____

Date signed: _____

Name (print): _____ Signature: _____

Date signed: _____